

SEP 15 2005

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Deliver to: Moulis, Thomas N, USPTO Art Group: 3747
Facsimile No.: (571) 273-8300 Date: September 15, 2005
From: Roger W. Blakely, Jr., Reg. No. 25,831
Our Docket No.: 2590P062 Number of pages 18 including this sheet.
Application No.: 10/782,486 Filing Date: 2/19/2004
Docket Due Date(s): 10/1/2005

Enclosed are the following documents:

- | | |
|---|---|
| <input checked="" type="checkbox"/> Amendment: _____ (<u>6</u> pgs) | <input type="checkbox"/> Issue Fee Transmittal |
| <input type="checkbox"/> Appeal Brief (_____ pgs) | <input type="checkbox"/> Notice of Appeal |
| <input type="checkbox"/> Application: _____
(_____ pgs) w/cover & abstract | <input type="checkbox"/> Petition for: _____ |
| <input type="checkbox"/> Assignment & Cover Sheet (_____ pgs) | <input type="checkbox"/> Request for Continued Examination (RCE) |
| <input type="checkbox"/> Certificate of _____ | <input type="checkbox"/> Reply Brief (_____ pgs) |
| <input type="checkbox"/> Continued Prosecution Application (CPA) | <input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i) |
| <input type="checkbox"/> Declaration & POA (_____ pgs) | <input type="checkbox"/> Request to Rescind Previous Nonpublication Request |
| <input type="checkbox"/> Drawings: _____ sheets, _____ figures | <input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter |
| <input type="checkbox"/> Extension of Time: _____ | <input type="checkbox"/> Response to Written Opinion (_____ pgs) |
| <input checked="" type="checkbox"/> Fee Transmittal (in duplicate) | <input type="checkbox"/> Terminal Disclaimer |
| <input type="checkbox"/> IDS & PTO/SB/08 (_____ pgs) | <input type="checkbox"/> Transmittal of Publication Fee Due |
| <input checked="" type="checkbox"/> Other Copies of 2 Previously Submitted Electronic Information Disclosure Statements (8 pgs) | <input checked="" type="checkbox"/> Transmittal Letter |

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.84)

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Jessica A. Clark Date 9/15/2005

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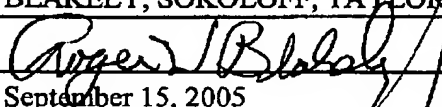
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SEP 15 2005

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	10/782,486
		Filing Date	February 19, 2004
		First Named Inventor	Oded E. Sturman
		Art Unit	3747
		Examiner Name	Moulis, Thomas N
Total Number of Pages In This Submission	18	Attorney Docket Number	2590P062

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">Copies of 2 Previously Submitted Electronic Information Disclosure Statements; Facsimile Cover Sheet</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Roger W. Blakely, Jr., Reg. No. 25,831 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	September 15, 2005

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Signature		Date	September 15, 2005

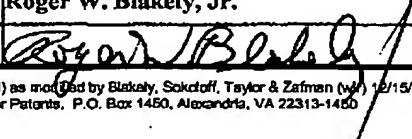
Based on PTO/SB/21 (04-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wr) 08/04/2004.
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SEP 15 2005

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		<i>Complete if Known</i>	
		Application Number	10/782,486
		Filing Date	February 19, 2004
		First Named Inventor	Oded E. Sturman
		Examiner Name	Moulis, Thomas N
		Art Unit	3747
		Attorney Docket No.	2590P062
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
TOTAL AMOUNT OF PAYMENT	(\$)	0.00	

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input type="checkbox"/> Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. <input type="checkbox"/> Credit any overpayments	

FEE CALCULATION																																																																																																																												
1. EXTRA CLAIM FEES																																																																																																																												
Total Claims <table border="1"><tr><td>10</td><td>-</td><td>20*</td><td>=</td><td>0</td></tr></table> Independent Claims <table border="1"><tr><td>3</td><td>-</td><td>3*</td><td>=</td><td>0</td></tr></table> Multiple Dependent	10	-	20*	=	0	3	-	3*	=	0	<table border="1"> <tr> <th>Extra Claims</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> <tr> <td>0</td> <td>50.00</td> <td>\$0.00</td> </tr> <tr> <td>0</td> <td>200.00</td> <td>\$0.00</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table>	Extra Claims	Fee from below	Fee Paid	0	50.00	\$0.00	0	200.00	\$0.00																																																																																																								
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SUBMITTED BY		<i>Complete (if applicable)</i>	
Name (Print/Type)	Roger W. Blakely, Jr.	Registration No. (Attorney/Agent)	25,831
Signature		Telephone	(714) 557-3800
		Date	09/15/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (NY) 12/15/2004.
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**FEE TRANSMITTAL
for FY 2005***Patent fees are subject to annual revision.***Complete if Known**

Application Number	10/782,486
Filing Date	February 19, 2004
First Named Inventor	Oded E. Sturman
Examiner Name	Moulis, Thomas N
Art Unit	3747
Attorney Docket No.	2590P062

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

0.00

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☒ None ☐ Other (please identify): _____

☐ Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☐ Credit any overpayments

FEE CALCULATION**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
10	0	50.00	\$0.00
Independent Claims	3	200.00	\$0.00
Multiple Dependent			

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1202 50	2202 25	Claims in excess of 20
1201 200	2201 100	Independent claims in excess of 3
1203 380	2203 180	Multiple Dependent claim, if not paid
1204 300	2204 150	**Reissue Independent claims over original patent
1205 300	2205 150	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)		(\$)
		0.00

**or number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description
Fee Code (\$)	Fee Code (\$)	
1051 130	2051 85	Surcharge - late filing fee or oath
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet.
2053 130	2053 130	Non-English specification
1251	2251	Extension for reply within first month
1252	2252	Extension for reply within second month
1253	2253	Extension for reply within third month
1254	2254	Extension for reply within fourth month
1255	2255	Extension for reply within fifth month
1401	2401	Notice of Appeal
1402	2402	Filing a brief in support of an appeal
1403	2403	Request for oral hearing
1451	2451	Petition to institute a public use proceeding
1450	2450	Petitions to the Commissioner
1807	1807	Processing fee under 37 CFR 1.17(e)
1808	1808	Submission of Information Disclosure Stmt
1809	1809	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	2810	For each additional invention to be examined (37 CFR § 1.129(b))

Other fee (specify)

SUBTOTAL (2)

(3)

Fee Paid

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Roger W. Blakely, Jr.	Registration No. (Attorney/Agent)	25,831	Telephone	(714) 557-3800
Signature	<i>Roger W. Blakely, Jr.</i>	Date	09/15/05		

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (w/1) 12/15/2004.
 SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Appl. No. 10/782,486
Amdt. Dated 09/15/2005
Reply to Office Action of July 1, 2005

SEP 15 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application. No. :	10/782,486	Confirmation No. 5671
Applicant :	Oded E. Sturman	
Filed :	02/19/2004	
TC/A.U. :	3747	
Examiner :	Moulis, Thomas N	
Docket No. :	2590P062	
Customer No. :	8791	

Commissioner for Patents
PO Box 1450
Alexandria VA 22313-1450

AMENDMENT

Sir:

In response to the Office Action of July 1, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 5 of this paper.